

BEFORE THE DEPARTMENT OF PUBLIC
HEALTH AND HUMAN SERVICES OF THE
STATE OF MONTANA

SENATE State Admin
Exhibit No. 9
Date 3-25-2011
Bill No. HB 543

In the matter of the adoption of New) NOTICE OF PUBLIC HEARING ON
Rule I, amendment of 37.87.903,) PROPOSED ADOPTION,
37.87.1201, 37.87.1202, 37.87.1206,) AMENDMENT, AND REPEAL
37.87.1217, 37.87.1222, and)
37.87.1223, and repeal of 37.88.910)
pertaining to psychiatric residential)
treatment facility reimbursement)

TO: All Concerned Persons

1. On March 30, 2011, at 10:30 a.m., the Department of Public Health and Human Services will hold a public hearing in the Auditorium, 111 North Sanders, Helena, Montana, to consider the proposed adoption, amendment, and repeal of the above-stated rules.

2. The Department of Public Health and Human Services will make reasonable accommodations for persons with disabilities who wish to participate in this rulemaking process or need an alternative accessible format of this notice. If you require an accommodation, contact Department of Public Health and Human Services no later than 5:00 p.m. on March 23, 2011, to advise us of the nature of the accommodation that you need. Please contact Gwen Knight, Department of Public Health and Human Services, Office of Legal Affairs, P.O. Box 4210, Helena, Montana, 59604-4210; telephone (406) 444-9503; fax (406) 444-9744; or e-mail dphhslegal@mt.gov.

3. The rule as proposed to be adopted provides as follows:

NEW RULE I OUT-OF-STATE PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY (PRTF) SERVICE REQUIREMENTS (1) Payment for Psychiatric Residential Treatment Facility (PRTF) services provided outside the state of Montana will be made only under the conditions specified in this rule and subchapter. The Montana Medicaid program will not make payment for PRTF services provided by out-of-state facilities unless the department or its designee determines that PRTF, and applicable PRTF waiver services in the state of Montana are unavailable. PRTF waiver sites are identified in ARM 37.87.1303.

(2) PRTF and PRTF waiver services in the state of Montana will be determined unavailable when:

(a) the youth has been officially screened for admission by all enrolled in-state PRTFs, and an applicable PRTF waiver site, and denied admission because the PRTFs or PRTF waiver site cannot meet the youth's treatment needs; or

(b) the youth has been officially screened for admission by all enrolled in-state PRTFs, and an applicable PRTF waiver site, and denied admission for one of the following reasons:

(i) a bed or opening is not available in a PRTF or PRTF waiver site; or

37.87.901. This rule does not apply to a session with a physician or midlevel practitioner for the purpose of medication management;

(b) targeted case management in excess of 120 units of service per state fiscal year and in accordance with ARM 37.87.808;

(c) all outpatient therapy services provided on the same day as comprehensive school and community treatment (CSCT) described at ARM 37.86.2224, 37.86.2225, 37.106.1955, 37.106.1956, 37.106.1960, 37.106.1961, and 37.106.1965;

(d) therapeutic group home services and extraordinary needs aide services in accordance with ARM 37.87.1011, 37.87.1013, 37.87.1015, and 37.87.1017.

(e) therapeutic family care (TFC) and therapeutic foster care (TFOC) services in accordance with ARM 37.87.1021, 37.87.1023, and 37.87.1025 and ARM Title 37, chapter 51;

(f) psychiatric residential treatment facility services defined in ARM 37.87.1202;

(g) psychiatric hospital and partial psychiatric hospital services defined in ARM 37.86.2901 and 37.86.3001; and

(h) as provided for in other rules.

(4) The department may waive a requirement for prior authorization or continued authorization when the provider submits documentation that:

(a) there was a clinical reason why the request for prior authorization or continued authorization could not be made at the required time, and the provider submitted a subsequent authorization request within ten business days; or

(b) a timely request for prior authorization or continued authorization was not possible because of a failure or malfunction of the department's or its designee's equipment that prevented the transmittal of the request at the required time and the provider submitted a subsequent authorization request within ten business days.

(5) The prior authorization or continued authorization requirement shall not be waived except as provided in this rule.

(6) Review of authorization requests by the department or its designee will be made with consideration of the department's clinical management guidelines. The department adopts and incorporates by reference the Children's Mental Health Bureau's Provider Manual and Clinical Guidelines for Utilization Management dated ~~January 15, 2011~~ May 13, 2011. A copy of the manual can be obtained from the department by a request in writing to the Department of Public Health and Human Services, Developmental Services Division, Children's Mental Health Bureau, 111 N. Sanders, P.O. Box 4210, Helena, MT 59604-4210 or at www.dphhs.mt.gov/mentalhealth/children/index.shtml.

(7) The department may review the medical necessity of services or items at any time either before or after payment in accordance with the provisions of ARM 37.85.410. If the department determines that services or items were not medically necessary or otherwise in compliance with applicable requirements, the department may deny payment or may recover any overpayment in accordance with applicable requirements.

(8) The department or its designee may require providers to report outcome data or measures regarding mental health services, as determined in consultation with providers and consumers.

AUTH: 53-2-201, 53-6-113, MCA

11. The bill sponsor contact requirements of 2-4-302, MCA, do not apply.

Rule Reviewer

Anna Whiting Sorrell, Director
Public Health and Human Services

Certified to the Secretary of State February 28, 2011